

10/568601

APPLICATION DATA SHEET

AP20 Rec'd PCT/PTO

14 FEB 2006

**Inventor Information**

Inventor One Given Name: PETER  
Family Name: KLAPPROTH  
Name Suffix:  
Mailing Address Line One: Dorothea-Erxleben-Strasse 34  
Mailing Address Line Two:  
City: 23562 Lübeck  
State or Province:  
Postal or Zip Code:  
City of Residence:  
State or Prov. of Residence:  
Country of Residence: Germany  
Citizenship Country: Germany

Inventor Two Given Name: ECKART  
Family Name: ULBRICH  
Name Suffix:  
Mailing Address Line One: Wischhoff 8  
Mailing Address Line Two:  
City: 23669 Timmendorfer Strand  
State or Province:  
Postal or Zip Code:  
City of Residence:  
State or Prov. of Residence:  
Country of Residence: Germany  
Citizenship Country: Germany

Inventor Three Given Name:

Family Name:

Name Suffix:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

Country of Residence:

Citizenship Country:

Given or Company Name of Applicant:

Family Name, if any:

Name Suffix:

Authority Code:

Mailing Address Line One:

Mailing Address Line Two:

City:

State or Province:

Postal or Zip Code:

City of Residence:

State or Prov. of Residence:

Country of Residence:

Citizenship Country:

## **Correspondence Information**

Name Line One:	Henry M. Feiereisen
Name Line Two:	Henry M. Feiereisen, LLC
Address Line One:	350 Fifth Avenue
Address Line Two:	Suite 4714
City:	New York
State or Providence:	NY
Country:	
Postal or Zip Code:	10118
Telephone:	(212)244-5500
Fax:	(212)244-2233
Electronic Mail:	<u><a href="mailto:info@feiereisenllc.com">info@feiereisenllc.com</a></u>

## **Application Information**

Title Line One:	Device for Muscle Stimulation
Title Line Two:	
[Repeat for any additional lines]	
Suggested classification:	
Suggested Tech. Center:	
Total Drawing Sheets:	2
Suggested Dwg. Figure for Pub.:	Fig. 1; Fig. 2; Fig. 3; Fig. 4
Docket Number:	KLAPPROTH
Application Type: [Utility]	Utility
Licensed US Govt. Agency:	
Contract or Grant Numbers One:	
Contract or Grant Numbers Two:	
Secrecy Order in Parent Appl.?	
if plant patent app.,	
Latin Name of genus and species of plant claimed:	

## **Representative Information**

Representative Number One: 020151

Representative Number Two:

[Repeat for extra registration numbers]

### **Domestic Priority Information**

This application is a: US-National Phase of International Application  
Application One: PCT/DE2004/001970  
Filing Date: September 3, 2004

which is a:  
Application Two:  
Filing Date:  
[repeat if necessary]

### **Foreign Application Information**

Foreign Application One: 103 41 044.9  
Filing Date: September 3, 2003  
Country: Germany  
Priority Claimed: Yes

Foreign Application Two: 10 2004 009 452.7  
Filing Date: February 24, 2004  
Country: Germany  
Priority Claimed: Yes

### **Assignee Information**

Assignee Name: Fides Finanz-Invest GmbH &Co. KG  
Address Line One: Wischoff 4  
Address Line Two:  
City: 23669 Timmendorfer Strand  
State or Province:  
Country: Germany  
Postal or Zip Code: